

# **ANNUAL ELEVATOR INSPECTION CERTIFICATE APPLICATION**



Department of Professional and Financial Regulation  
Office of Licensing and Registration

## **BOARD OF ELEVATOR AND TRAMWAY SAFETY**

35 State House Station  
Augusta, ME 04333-0035

Office Telephone: (207)624-8629  
Hearing Impaired: (207)624-8563  
Website: [www.MaineProfessionalReg.org](http://www.MaineProfessionalReg.org)

Office located at: 122 Northern Avenue, Gardiner, Maine

# **APPLICATION INSTRUCTIONS ELEVATOR INSPECTION CERTIFICATE**

**COMPLETING THE APPLICATION FORM** – Return the following to this office:

- Completed Application Form (PER UNIT)
- Inspection Certificate Fee of \$100.00 due 30 days prior to certificate expiration date. \$50.00 late fee if not submitted 30 days prior to expiration
- Inspection Report

Incomplete applications will be returned.

As the owner of an elevator, you are required to arrange for your elevator's annual inspection by contacting a licensed private elevator inspector.

Once inspected, you must submit the inspection report to this office with the attached application and certificate fee of \$100.00 30 days prior to the certificate expiration date. Your new certificate will expire in the same month each year unless you petition the office for a change.

If you do not file the inspection report, annual application and \$100.00 certificate fee 30 days prior to the certificate expiration date, you must submit a late filing fee of \$50.00 in addition to the regular certificate fee of \$100.00.

It is a Class E crime to operate an elevator in Maine without a current and valid inspection certificate (32 M.R.S.A. § 15223). As the owner of an elevator, you are legally responsible for the safety and maintenance of the elevator. If you allow your elevator to be used without a current certificate, your elevator may be taken out of service by a state elevator inspector and you may be subject to administrative discipline, fines or criminal prosecution for allowing your elevator to be operated without a current inspection certificate.

# ELEVATOR CERTIFICATE RENEWAL APPLICATION

Date Received	STATE OF MAINE DEPT. OF PROFESSIONAL & FINANCIAL REGULATION OFFICE OF LICENSING & REGISTRATION BOARD OF ELEVATOR & TRAMWAY SAFETY 35 STATE HOUSE STATION AUGUSTA, ME 04333 TEL: (207)624-8629 FAX: (207)624-8636 HEARING IMPAIRED: (207)624-8563	FOR OFFICE USE ONLY Do not write in this box.  CK # _____  AMT _____  CN _____  CODE 4530/1908
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**AMOUNT DUE: \$100.00**

**Plus \$50.00 LATE FEE if application not received 30 days prior to expiration date.**

**A COMPLETED APPLICATION MUST BE SUBMITTED PER UNIT. DUPLICATE FORM AS NECESSARY**

**PLEASE NOTE:** You must enclose, with this application, the inspection report and \$100.00 certificate fee 30 days prior to the certificate expiration date. If you do not file the annual application, inspection report and \$100.00 certificate fee 30 days prior to the certificate expiration date, you must submit a late filing fee of \$50.00 in addition to the regular certificate fee of \$100.00. Your new certificate will expire in the same month each year unless you request a change of expiration date. **The expiration date cannot be extended beyond the current expiration date.**

## UNIT INFORMATION

Elevator Registration #:	Name of Building:
Building Location: _____ Street City Zip Code	
Location of Unit in Building (ie; lobby, gym, wing, etc.):	
Certificate Expiration Date:	Change Certificate Expiration Date to:  The expiration date cannot be extended beyond the current expiration date.

## OWNER INFORMATION

Name of Owner:			
Mailing Address:			
City:	State:	Zip:	County:
Contact Person:		Phone Number:	

**PAYMENT OPTIONS:** ☐ Check or Money Order Payable to "Treasurer State of Maine". Write certificate number on check.  
☐ Credit Card: MasterCard or VISA Only. Complete the following:  
I authorize the State of Maine, Department of Professional & Financial Regulation, Office of Licensing & Registration to charge my MasterCard/VISA     -     -     -     Exp. Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
in the amount of \$ \_\_\_\_\_. Required Signature: \_\_\_\_\_